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TITLE: Our Strength in Families (OSIDF): A Web-Based Interactive Coping Skills and Resiliency Program for Military Families

PRINCIPAL INVESTIGATOR: Emil Chiauuzzi Ph.D.

CONTRACTING ORGANIZATION: Inflexxion, Inc.  
Newton, MA 02464

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## **INTRODUCTION:**

The project builds on existing interventions and available knowledge on family functioning to develop an interactive, Web-based relationship-enhancement intervention for military couples experiencing deployments. Our Strength in Families (OSiF; [www.OSiFprogram.org](http://www.OSiFprogram.org)) will incorporate features demonstrated to improve relationship functioning among couples experiencing military deployments, including the provision of preparatory educational material and various tools designed to enhance a range of coping skills and provide social support.

## **BODY:**

### ***Content synthesis for mini courses.***

We have developed a list of 20 course topics for the OSiF program. Additionally, we have begun grouping literature, data, and other materials gathered during Phase I according to relevance to the 20 course topics. The topics have also been reviewed by an Iraq War Veteran and will be presented to the Advisory Board next month.

We have used information generated from expert interviews, focus groups, individual interviews, concept mapping, and advisory board members to elaborate on content areas to be included in each of the 20 course topics we developed previously. We have also begun to consider how the relevant areas of content can be incorporated into mini-courses, tools, self-ratings, etc., throughout the site. The course topics and preliminary content areas are described in Appendix A

### ***Update of Phase I literature review.***

We have consulted relevant databases (e.g., PsycINFO) for recently published literature on the impact of deployment on couples and families. Newly acquired reports continue to be integrated into our previous literature review and used for mini course development. We have reviewed over 300 articles, empirical studies, deployment-related manuals and brochures, and other web-based content and categorized them with regard to their content relevance to our 20 courses. These sources will next be used to refine content development in Phase II.

### ***Beginning stages of preparation for submission to Inflexxion Inc. Institutional Review Board and Department of Defense Human Subjects Research Review Board.***

We have begun developing the protocol and consent forms. We have begun developing the protocol and consent forms for the usability portion of the study. The Inflexxion IRB plans to review the materials in January 2006. Following this review and approval, the documentation will be submitted to the Department of Defense Human Subjects Research Review Board. The OSiF team learned on our administrative visit to Ft. Drum, that Ft. Drum uses the Walter Reed Army Medical Center (WRAMC) IRB. Therefore, all protocols, consents, and recruitment postings will need to be in the WRAMC templates (<http://www.wramc.amedd.army.mil/departments/dci/templatesframe.htm> ).

### ***Contacts with Phase II sites.***

We have made arrangements for first visits to our two primary field test sites: Ft. Drum NY (10<sup>th</sup> Mountain Division – Light Infantry) and Schofield Barracks HI (25<sup>th</sup> Infantry Division – Light), having received cordial responses from MAJ Paul Morrissey, our chief contact at Ft. Drum, and

LTC Thomas Baker, our chief contact at Schofield Barracks. The Ft. Drum visit is scheduled for January 9th and the Schofield Barracks visit will take place the last week of January or the first week of February. Tentative agenda items include: identification of all contact personnel at each site, negotiating the Institutional Review Board process for each site, space needs at each site, information for tailoring site-specific resources into the OSiF program, and specification of a timeline of events for the field test. The objectives of these visits are to brief these sites on the development of the program to date and solicit further input on specific content, as well as to begin discussions regarding the implementation of the field trial.

### ***Measure development for Phase II***

We have continued to finalize item selection for the newly-developed measures for the Phase II field trial. The Advisory Board will also review these measures in the next reporting period. The advisory board has been furnished with a list of the proposed measures for the Phase II Efficacy Study and members are currently in the process of reviewing the individual measures. The measures as proposed in the Phase II application are: The Personal Background Questionnaire, the Preparedness for Deployment Scale, the Concerns About Family Disruptions Scale, the Satisfaction with and Commitment to the Military Measure, the Brief COPE, the Quantity-Frequency Index, the Dyadic Adjustment Scale, the Revised Conflict Tactics Scale, the Beck Depression Inventory, the Beck Anxiety Inventory, the State-Trait Anger Expression Inventory, and the Medical Outcomes Study Short Form. Once the measure review is complete and any changes have been implemented, the measures will be submitted to the IRBs for approval.

### ***Administrative Visit to Ft. Detrick***

Drs. Simon Budman, Emil Chiauzzi, Dan King, Lynda King and Dawne Vogt visited Ft. Detrick MD on December 7, 2005. The team met with Major Lolita Burrell, Ph.D., Dr. Steve Grate and LTC Hover. The meeting focused on accomplishments in Phase I, accomplishments in Option Period and Plans for Phase II. We informed them about our performance sites: Fort Drum and Schofield Barracks. We also went to some length to discuss issues of IRB approvals and how those could be expedited so as not to hamper the progress of Phase II of the project.

### ***Advisory Board Meeting***

Project team members met with the Advisory Board by telephone on January 12, 2006. The purpose of this meeting was to receive their expert feedback on the proposed course topics for the web-based intervention. Their feedback has been incorporated into the list of course topics. (See Appendix B for meeting notes)

### ***Field site preparation***

#### ***Fort Drum:***

Four meetings were conducted with the OSiF Team (Dan King, Ph.D., Lynda King, Ph.D., Emil Chiauzzi, Ph.D. and Synne Venuti, MSW) and staff at Fort Drum, NY.

#### ***Meeting 1***

The OSiF team met with Major Paul Morrissey, MD, MBA, Todd Benham, M.D., Chief of Mental Health Services (who will be the Acting Chief of Behavioral Health while Maj. Morrissey is deployed in Iraq), and Diane Orrico, MSW (pending Acting Chief of Social Work). Additional

features that were suggested were looking in to the feasibility of doing some form of "e-card" or enhanced "live" communication between family member and soldier while soldier is deployed. The group also recommended adding (either to the Efficacy Study or to the site itself) information for soldier re: "R and R", as many are granted short term leave while on a tour and are sometimes able to reunite with their families briefly. Other feedback included the possibility of opening up the Efficacy Study to anyone Active Duty to complete with their primary support (i.e. including a parent or non- married significant other). The group also recommended we make sure the site is at an appropriate reading level and that we avoid mental health jargon.

Additionally, we asked MAJ Morrissey for his suggestions in the following areas:

**IRB Issues:** All forms and formats should comply with the Walter Reed Army Research Guidelines. This should be the only IRB aside from Inflexxion's that will need review. For IRB navigation issues, can contact Dr. Deane Aikins at the West Haven VA Medical Center and/or COL Maria Sjogren at Walter Reed. We will also need to complete an on line Human Subjects Training through Walter Reed.

**Project Communication Issues:** While MAJ Morrissey is in Iraq, he plans to continue to be in touch with us regarding this project and is very interested in reviewing and having input on the content of the intervention. As stated, Dr. Benham will also be available. Regarding emergency issues, during the business day, personnel should go to the mental health center. Before 11 PM and after business hours and on holidays and weekends, in a mental health emergency personnel should go to the Guthrie Urgent Care Center and after 11 PM before business hours, personnel should go to the Samaritan Hospital Emergency Department.

**Logistical Issues:** Most rooms in barracks have computers, plus there are other classroom resources and libraries with computer capabilities. It should not be a problem to get space to conduct our study. Carol Flannery is in charge of Information Management at Ft. Drum. MAJ Morrissey recommends that we look for an Army spouse to act as an RA for the study.

**Recruitment:** We can post in the base newspaper, *The Blizzard*, and have the Family Readiness groups announce the study. MAJ Morrissey finds people excited to participate in studies.

**Delivery of Intervention:** As far as the Efficacy Study design was concerned, logistically, soldiers and families definitely know at least a month before they deploy and in some cases, up to a year in advanced. MAJ Morrissey recommended that we design the site particularly for Active Duty Military and have additional information for Reservists and National Guard members.

### *Meeting 2*

The OSiF Team, along with MAJ Morrissey, also met with LTC Craig Webb, MD, Deputy Commander for Clinical Services and provided him with a brief overview of the web based intervention and efficacy study. LTC Webb stated that he believed that this was a need for military families.

### *Meeting 3*

Next, the OSiF team and MAJ Morrissey met with COL John (Jack) Wempe, MD, the Chief Medical Officer of Ft. Drum to provide him with a brief overview of the web based intervention and efficacy study. COL Wempe also stated that he felt this would be an added and beneficial

resource for the families. He also brought up the issue that there are personnel deploying from Ft. Drum at all time but that they anticipate a large level deployment to be in the summer of 2007.

#### *Meeting 4*

During the last meeting of the day, the team met with MAJ James Miller, Chief of Social Work (who will be deployed shortly; Diane Orrico to assume acting role), Emma Miles, Bonnie Riley and Steve Plumb (social workers) to provide them with an overview of the web-based intervention and efficacy study. All agreed this would be an excellent resource and offered their services with recruitment.

#### *Follow-Up Contacts:*

MAJ Morrissey recommended that the Team contact Deborah Stellfox, Family Readiness Coordinator, who works on Family Deployment issues through Operation READY. We followed up with Ms. Stellfox, who was eager to assist us. In Meeting 4, the Ft. Drum group recommended that the Team talk with John Detrick and Phil McDowell who currently provide briefings to deploying soldiers and family members.

On January 24, 2006, we conducted a conference call with Mike Kehoe, LCSW, Dean Anthony, MSW graduate student, Phil McDowell, LICSW, and Karen Sheehan, with Operation READY. The group provided an overview of current resources and briefing procedures at Ft. Drum. They spoke of the hour long soldier briefings ranging in size from 10-1000 soldiers, where some of the soldiers are facing deployment for the first time and others who have been through multiple deployments. The group identified that tailoring the content based on the soldiers needs would be helpful. Karen Sheehan reported that family members do not attend these briefings, but that there are separate briefings for family members. She also stated that there are a number of voluntary programs for family members prior to, during, and at the reunion phase of deployment. The group provided additional feedback about the course topics, which have been reflected in that section of the report. General comments about the style of the web based intervention include making sure the language does not "talk down" to soldiers and that we should appeal to a broad range of educational backgrounds.

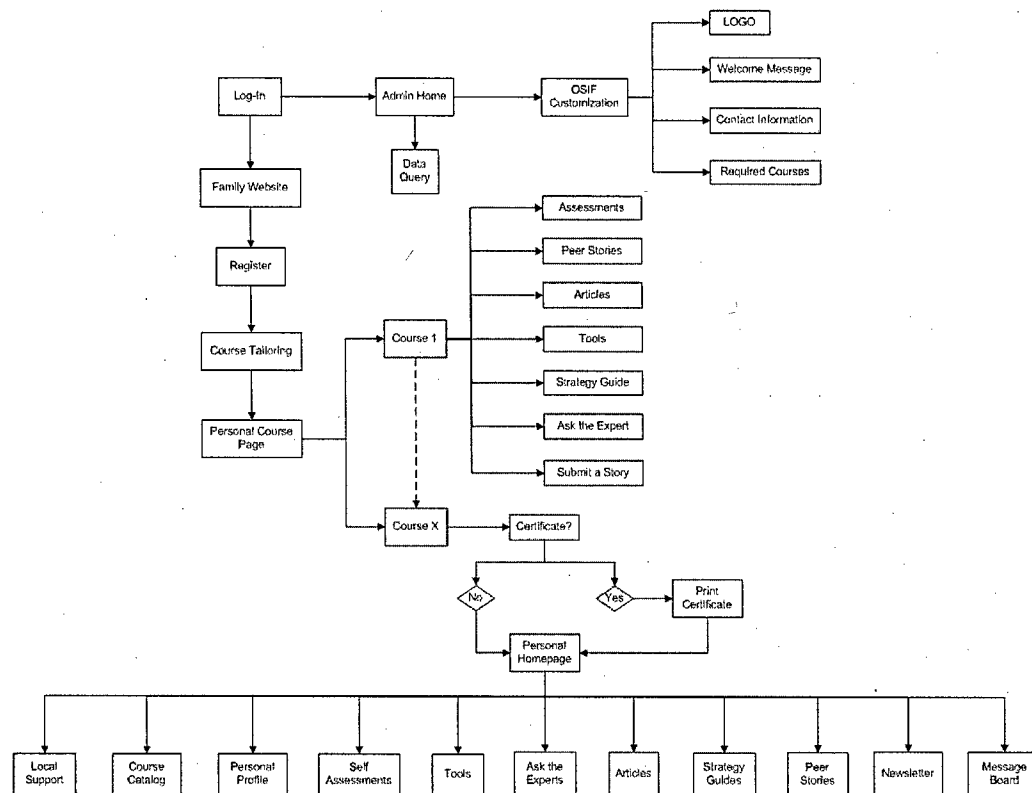
#### *Schofield Barracks:*

The team has been in contact with our liaison for Phase II at Schofield Barracks, LTC Thomas Rogers, 25<sup>th</sup> Infantry Division Surgeon to arrange a site visit. At present, LTC Rogers is making preliminary contacts with Army Community Services and others to arrange meetings with key personnel during this visit. The trip to Schofield will take place either just before February 8<sup>th</sup> or just after February 18<sup>th</sup>, to accommodate Division training exercises. As at Ft. Drum, the agenda will include a full update on the project to appropriate Command personnel, overview of field trial timelines and requirements, and a discussion of IRB procedures.

### ***Technological Advances.***

The below User Flow Diagram was developed and will be expanded upon in phase II.

#### ***User Flow Diagram:***



#### **STEP 1: OSiF COURSE INFO**

User accesses OSiF website. The entry page will provide information regarding course and registration.

#### **STEP 2: MAIN LOG-IN**

User logs in or registers.

#### **STEP 3: COMPLETE TAILORING QUESTIONNAIRE**

This is required to complete the course and gives feedback.

#### **STEP 4: MAIN COURSE PAGE**

This page shows a list of required and tailored modules. Completed modules will have an indicator showing completion and partially completed modules will have an indicator showing partial completion. The user can access completed modules again. There are areas that collect tools from completed modules – if the user tries to access before completing modules, he or she will get message about collection process.

#### **STEP 6: USER SELECTS FIRST MODULE**



There will be an indication that user should begin course

#### STEP 7: BEGIN MODULE

The user follows linear path through course and can print assessment feedback and the practice exercise (homework). He or she will be encouraged to complete exercise before entering next module. The user can bookmark progress and will return to the main course page when done. Completed course is marked as complete, or if bookmarking, marked as incomplete.

#### STEP 9: USER MAY ACCESS TOOLS/ASSESSMENT/EXERCISE

Tracking tools will be available from the main course page as a separate tool after the first modules is completed.

#### STEP 10: LOG OUT

The user logs out.

#### STEP 11: RETURN FOR NEXT MODULE

After returning and logging in, the user returns to the main course page and selects next module and process is repeated until last session. After the last session the user will receive a congratulatory completion message. The user will be able to access all features of the website when the course is completed.

#### *Wireframe:*

IRB material for the usability test was submitted to the Inflexxion IRB and approval is pending. We will administer one completed mini-course for usability and acceptance testing by military personnel and their families in Phase II.

#### *Copy Deck Production:*

The copy deck is the translation of site content into a form that can be utilized by site designers and programmers. Basic content for key topics relating to communication, management of extreme emotions such as depression and anxiety, problem-solving, social functioning, goal-setting, coping challenges such as substance abuse and stress, and cognitive techniques has been developed. In Phase II, we will adapt this material for a military audience and expand it to include common scenarios experienced by deploying military personnel and their families.

#### *Technology Plan:*

The technology plan that has been developed is based on several main assumptions:

- The platform will built using .Net and SQL 2000 software.
- Tools and code for site personalization: tailoring display of relevant content based on individual user assessment.
- The site will automatically track content for all users.
- The site will allow content developers to easily add new tailored content or modify existing content tailoring.
- Content management will treat content as stand-alone pieces, allowing easy content insertion into the site.
- Other features to be implemented will include email newsletters, a message board, and search.

There will be administrative features that allow bases and other buyers of OSiF to monitor traffic and aggregate, anonymous user data. The following features will be included:

- Administrators within a given base will be able to track the usage and assessment data at an aggregate level, for their users only.
- A report for each assessment will be created; each report further be broken down in demographics captured.
- The usage report will provide the number of hits for specific pages; length of time spent on a site and can be filtered for a date range.
- The website and the platform will support multi-site implementation.
- OSiF will offer the ability to brand "my page" with the base logo.
- OSiF will be able to provide users with specific information contact information for family and other base services on a help page.

#### *Tool Design:*

Inflexxion has a library of over 50 fully designed interactive tools. Tools will be adapted for use by military personnel and families within each of the 20 modules ("mini-courses"). These tools teach users about topics such as communications skills, positive thinking styles, stress management, identification of more serious emotional reactions such as depression, etc. The tools will be "reskinned" to match the "look and feel" of the OSiF website.

#### *Development of Mini-Courses*

The basic mini-course flow for key topics relating to communication, management of extreme emotions such as depression and anxiety, problem-solving, social functioning, goal-setting, coping challenges such as substance abuse and stress, and cognitive techniques has been developed. This flow includes the integration of tools, peer stories, expert tips, exercises, and self-assessments. In Phase II, we will adapt this flow for the military personnel and family audiences.

#### **KEY RESEARCH ACCOMPLISHMENTS:**

- Content synthesis for mini courses
- Update of Phase I literature review
- Beginning stages of preparation for submission to Inflexxion Inc. Institutional Review Board and Department of Defense Human Subjects Research Review Board
- Contacts with Phase II sites

*Fort Drum*

*Schofield Barracks*

- Measure development for Phase II
- Administrative Visit to Ft. Detrick
- Advisory Board Meeting
- Field site preparation
- Technological Advances

*User Flow Diagram:*

*Wireframe:*

*Copy Deck Production:*

*Technology Plan*

*Tool Design*

*Development of Mini-Courses*

**REPORTABLE OUTCOMES:**

none

**CONCLUSION:**

The project builds on existing interventions and available knowledge on family functioning to develop an interactive, Web-based relationship-enhancement intervention for military couples experiencing deployments. Our Strength in Families (OSiF; [www.OSiFprogram.org](http://www.OSiFprogram.org)) will incorporate features demonstrated to improve relationship functioning among couples experiencing military deployments, including the provision of preparatory educational material and various tools designed to enhance a range of coping skills and provide social support.

**REFERENCES:**

none

## **APPENDICES:**

### **Appendix A:**

#### ***Module Outlines and Descriptions***

##### ***Module 1: Introduction to the program***

- a. Overview of OSiF
- b. Provide the main ideas of the program (e.g., focus on prevention)
- c. Go over the importance of preparation for the family
- d. Families are important when it comes to military readiness
- e. Go over link between relationship functioning and functioning in other areas (e.g., mental and physical health)
- f. Prepared military personnel are more mission focused and less distracted
- g. Partners who are more self-reliant and resilient are more capable of handling separation challenges
- h. Assess motivation
- i. Use motivational strategies (e.g., costs and benefits of family preparation)
- j. Provide expert tips for maintaining motivation
- k. Peer story of prepared and unprepared family

##### ***Module 2: Getting legal and personal affairs in order prior to separation/deployment***

- a. Planning as if separation/deployment is going to happen
- b. Wills
- c. Powers of attorney
- d. Bank access
- e. Birth certificates
- f. Marriage licenses
- g. Work/Small business
- h. Childcare arrangements
- i. Doctor's visits
- j. Policies and procedures for deployed small-business owners
- k. Plan for the possibility the military personnel does not return
- l. Emergency contacts/social support system
- m. Storing household goods and vehicles
- n. DEERS enrollment

##### ***Module 3: Developing a household management plan prior to separation/deployment***

- a. Planning for a decrease or increase in income
- b. Managing finances/Complete a family finance inventory
- c. Home and auto maintenance
- d. Care for Children (include resources for single parents, i.e. VFW National Home for Children)
- e. Support from relatives/friends
- f. Pet care
- g. Children's chores

- h. Planning ahead for important events (birthdays, anniversaries, holidays, etc.)
- i. Thinking about what has been done and worked well during prior separations

*Module 4: Healthy expectations about separation/deployment*

- a. Provide statistics for positive adaptation (e.g., 85% of returning veterans do not report difficulties meeting their family, work, and social demands)
- b. Military Separations and Deployments as a way of life
- c. Multiple/extended separations/deployments
- d. Viewing the separation/deployment as a family affair (family that stays at home is not the supporting cast)
- e. Military separations/deployments from your partner's perspective
- f. Viewing the separation/deployment as an opportunity for growth
- g. The powers of positive thinking
- h. Changing the way you feel by changing the way you think
- i. Errors in thinking and the downward spiral
- j. Reversing the downward spiral
- k. Thought diaries

*Module 5: Potential positive impacts of separations/deployments*

- a. Builds confidence in ability to handle separation
- b. Develop and strengthen support system
- c. Feel proud of ability to manage stressors
- d. Develop new skills by taking on new role/s
- e. Opportunity for self-development (e.g., online courses, new projects or hobbies)
- f. Meet new friends
- g. Renewed appreciation for partner
- h. Closer relationships with children
- i. Finding meaning and purpose from your experiences (e.g., lessons learned, spiritual awareness, changes in views of the future)

*Module 6: Common positive and negative emotions across the separation/deployment phases*

- a. Initial reaction (denial, fear, excitement, despair, protest, self-numbing, detachment)
- b. Departure (excitement, numbing of feelings, sadness, loneliness, anxiety)
- c. After departure (excitement, relief, feelings of emotional disorganization and sadness/despair, fear, guilt, anger)
- d. Recovery and stabilization alternates with feelings of destabilization and anxiety (e.g., due to uncertainty about the outcome and rumors/media reports)
- e. Anticipation of homecoming (joy, relief, excitement, anger, hurt, anxiety)- possible unrealistic expectations for the end of all emotional pain and numbing
- f. Reunion (possible emotional overload, excitement, numbing and emotional dullness, loneliness)
- g. Reintegration and stabilization (possible recurrences of old negative emotions from the separation/deployment can be triggered during family transitions and crises)
- h. Common emotions experienced by those experiencing multiple separations/deployments

*Module 7: Coping with feelings of sadness and loneliness*

- a. Understanding sadness and loneliness (symptoms and signs)

- b. Self-assessments
- c. The possible effects of sadness and loneliness
- d. Specific patterns of negative thinking and correcting them
- e. Specific tips and tools for reducing negative thinking
- f. Tool: "Positive Thought Generator"
- g. The importance of staying active
- h. Activity scheduling (including positive activities in your schedule)

*Module 8: Coping with stress*

- a. Understanding what stress is and how it develops
- b. Self-assessments
- c. Understand the physical, emotional, and social effects of stress
- d. Positive role of stress in motivating behavior
- e. Learn about the stress response
- f. Learn about different forms of coping for stress
- g. Learn important breathing techniques to reduce stress
- h. Learn imagery and visualization skills
- i. Learn about patterns of stressful thinking and how to correct this
- j. Tool: "Positive Thought Generator"
- k. "Expert tips" for stress management (e.g., waking up earlier, prioritizing, set realistic daily goals, get enough rest, volunteer, keep a journal, etc.)
- l. Emphasize importance of developing communication and family readiness plans

*Module 9: Maintaining health and wellness during separation/deployment*

- a. Health effects of separations/deployments (e.g., common changes in health following separations/deployment)
- b. Stress and health
- c. Maintaining health as a resilience strategy
- d. Maintaining healthy habits (sleep hygiene, health care use, smoking, etc.)
- e. Decreased strength/energy
- f. Keeping fit (review different forms of exercise- aerobic, weight training, etc.)
- g. Diet and nutrition (dietary guidelines, the "Food Pyramid," etc.)
- h. Homework: develop plan for maintaining health

*Module 10: Communication throughout the separation/deployment phases*

- a. The importance of communication
- b. Changes in communication after separation/deployment
- c. Barriers to communication
- d. Tips for effective verbal (e.g., clear statements, "I statements") and nonverbal (e.g., posture, facial expression) communication
- e. Improving listening skills (reflective listening)
- f. Assertiveness skills (rather than being avoidant or aggressive)
- g. Positive affirmations (noting positive things your partner does)
- h. Avoiding communication traps (e.g., mind reading, blaming, preaching, silent treatment, hitting below the belt, etc.)
- i. Methods of communication (letters, email, phone, care packages, audiotapes/videotapes, video conferencing)
- j. Determining what should and should not be communicated during separation/deployment

- k. Talking about the separation/deployment upon the military personnel's return
- l. Recognizing adjustment issues in your partner and how to seek help

*Module 11: Coping with anger and managing conflict positively*

- a. Understanding your anger and how it develops
- b. Self-assessment of anger
- c. Understanding the relationship between thoughts, feelings, and the physical component of anger
- d. Fight or flight response
- e. Anger-related negative thinking
- f. Anger can be very adaptive (e.g., in dangerous situations)
- g. Anger can be useful when expressed in a positive way
- h. Learning to express anger assertively (without being overly passive or aggressive)
- i. Taking "time outs" during anger-provoking situations
- j. Using support network when angry
- k. Go over steps for successful problem-solving
- l. Other tips for communication during conflict (e.g., focus on specific issue at hand, listen to partner, respecting your partner's position, do not hit below the belt, do not avoid the issue, etc.)
- m. Unique issues/challenges associated with dealing with conflict from afar

*Module 12: Avoiding impulsive behaviors (substance use and abuse, gambling, excessive shopping)*

- a. Defining addictive behavior
- b. Discuss substance use as a faulty coping strategy for dealing with separations/deployments
- c. Substance use to numb feelings and self-medicate
- d. Dangers of drinking and doing drugs overseas
- e. Tips for avoiding excessive alcohol or drug use
- f. The danger of excessive shopping during and after separation/deployment
- g. Gambling problems
- h. When and how to get help
- i. Substance use self-assessment

*Module 13: Coping with uncertainty, media reports, and rumors*

- a. Accepting the lack of control over separation/deployment events
- b. Concentrating on what you can control
- c. Assessment: Readiness Inventory
- d. Maintaining routines and staying active
- e. Seeking and giving social support
- f. Consider the source when you hear something about your partner
- g. Limiting media exposure
- h. Learning where to get good information
- i. Rumors in theater
- j. Dealing with the joy killers/ rumor makers

*Module 14: Common reactions to stressful or traumatic events related to the separation/deployment*

- a. Reviewing common reactions to trauma among separated/deployed military personnel
- b. Reviewing common reactions to your partner's trauma
- c. The symptoms related to trauma, including posttraumatic stress
- d. Experiencing symptoms is normal
- e. The effects of trauma on your relationship (e.g., focus on avoidance and numbing)
- f. The effects of trauma on parenting and child-rearing
- g. The importance of communication
- h. Other couples-based strategies for handling the effects of trauma
- i. The "drive on" philosophy

*Module 15: Using military family resources/services during separation/deployment*

- a. Emphasize importance of planning for seeking material and social support
- b. Family support groups
- c. Family program coordinator
- d. Chaplain and other faith-based sources of support
- e. Local community social services
- f. Family Assistance Center
- g. Army Emergency Relief
- h. Legal Assistance
- i. Alcohol and drug prevention
- j. Military OneSource
- k. On-line spouse support networks
- l. Rear Detachment Group
- m. Behavioral Health Services
- n. Operation for Military Kids (OMK)

*Module 16: Social support during the separation/deployment for family members*

- a. Social support and mental health
- b. Social support and physical health
- c. Review some research findings and provide statistics
- d. Your social circle and the difference between "good" and "bad" social support
- e. Communicating with other military families
- f. Developing mutual support relationships (baby sitting clubs, carpools, friendships, etc.)
- g. The internet as a source of support
- h. Review formal and informal sources of social support for the veteran (e.g., family support groups)
- i. Developing a social support plan
- j. Providing social support to others
- k. Faith-based social support in local community

*Module 17: Changes in your partner and family roles*

- a. Physical, emotional, and behavioral changes in partner
- b. Both positive (e.g., strengthen relationships, return from separation/deployment refreshed for parenting role, learn better communication and new helpful family rituals, learn to value partner more) and negative changes (e.g., intimacy reduced, numbing, etc.)
- c. Partner taking on new roles (e.g., paying bills, maintaining house and car, sole responsibility for child rearing and discipline)



- d. Deployed partner taking on role as full-time military personnel
- e. Financial changes
- f. Parenting demands
- g. Talking about changes in self and family and new roles (e.g., avoiding abrupt "change in command" upon return)
- h. Expect changes in partner - you have both undergone a great deal
- i. Special considerations for "newlyweds" (couples who marry upon learning of deployment))

*Module 18: Special considerations for National Guard and Reserve members*

- a. Dealing with your and your partner's employer during separation/deployment
- b. Accessing healthcare during separation/deployment
- c. Getting support for partner during separation/deployment
- d. Strategies for avoiding isolation from sources of support and resources
- e. Unique aspects of the family support system of the National Guard and Reserves
- f. Getting Veterans Administration services/benefits

*Module 19: Helping children cope with military separations/deployment*

- a. Common reactions of children to separations/deployment across the phases (separated according to young children, school-age children, and adolescents)
- b. Reactions of children to multiple deployments
- c. Age-appropriate conversations about separations/deployment
- d. Helping children cope with stress (e.g., spend time with child, maintain routines, ensure proper rest, provide praise, encourage them to spend time with friends, maintaining routine, keep lines of communication open, etc.)
- e. Talking to children about homecoming
- f. Talking to teachers and other caregivers about deployment
- g. Military resources for parents and children
- h. Issues related to disciplining the child (maintaining rules/structure, monitoring, communication, warmth/responsiveness, but firm control)
- i. Positive aspects of parent's deployment (fosters maturity, encourages independence, strengthens family bonds)
- j. Doing what worked well during previous deployments
- k. Special considerations for children with single parent, deployed

*Module 20: Maintaining connections with children during military separations/deployments*

- a. Keeping children connected with the separated/deployed military personnel (e.g., writing letters, recording videotapes of parent and child, keeping a "treasure box" with items from the military personnel, mailing the child items, small gifts, cards, etc.)
- b. Getting reacquainted with children after separations/deployments
- c. Adjusting to changes in the child
- d. The importance of communication
- e. Helping children understand that both they and their parent have changed
- f. Maintaining connections with children across multiple separations/deployments
- g. \*All sections in this module will be separated according to the age of the child\*

## Appendix B:

### *Meeting Notes: Jan. 12, 2006*

#### *Attendees:*

##### *Inflexxion*

Emil Chiauzzi, Ph.D..  
Synne Venuti, MSW  
Whitney Kling, BA  
Corey Bieber, MPH  
Simon Budman, Ph.D.

##### *NC-PTSD*

Dan King, Ph.D.  
Lynda King, Ph.D.  
Dawne Vogt, Ph.D.  
Casey Taft, Ph.D.  
Jill Panuzio, BA

##### *Board Members*

Michelle Kelley, Ph.D.  
Shelley MacDermid, Ph.D.  
Jim Martin, DSW  
GEN Tom Tait  
Jessica Wolfe, Ph.D.

#### *General course content and development comments:*

Practical matters should be dealt with first

1. More emphasis should be placed on dealing with multiple and back-to-back deployments
  - o Going through additional deployments may be tougher than the first one
  - o Multiple deployment issue should be a thread throughout ALL COURSES
  - o Might be helpful to encourage people who are redeploying and their partners to think about what worked for them as far as communication, etc. on previous deployment
2. Reintegration period is important
  - o Military personnel need time to decompress after deployment
  - o Typically can see family for 48 hours and then have to go through a debriefing period where can't see family
  - o This is the least focused deployment phase, research-wise
3. It's okay (and even good) to be redundant with other materials that families will be receiving
4. May be beneficial to refer to separation as opposed to deployment in order to cover trainings, peacetime missions, etc.
5. Should have a course on impulsive behavior – shopping, gambling, etc.
6. Generally comes across as negative – most families do not fall apart
  - o Content may be skewed toward clinical population
7. Kids/parenting issues may be more prominent in the minds of our audience than we are allowing for with the course topics
8. "Family that stays at home is not the supporting cast" – the entire family goes through the deployment

#### *Comments on specific modules:*

1. Legal affairs module

- Very important – can't focus on other areas until legal/personal matters are taken care of
  - Should be called "legal and personal affairs" to include other matters such as childcare, making sure all family members have a visit to the doctor before the deployment, etc.
  - Common to put these sorts of matters on the backburner, particularly for guard/reserve
  - Plan ahead for how to deal with birthdays and holidays
2. Household management plan
- This needs to be done early and by both partners
  - Planning for financial emergencies (often come up)
  - Need to think about what you'll need from your partner beforehand
3. Common emotions
- Denial of deployment is common, especially among young and first time deploying soldiers
4. Need to plan "as if it is definitely going to happen"
- Should stay away from getting too clinical with words like depression, anxiety, etc.
  - Couples may not know the difference between depression and anxiety; may not be able to describe it
  - With anger, important to emphasize respect for the other partner's position
  - Unique issues with respect to dealing with conflict from afar
5. Coping with uncertainty, media reports, and rumors
- Anxieties may be raised due to lack of communication
  - Due to false information – the first report is almost always incorrect
  - Need for rumor control, especially among young military personnel
6. Social support
- Important to seek social support that is supportive
  - Seeing others socially due to obligation may not be beneficial/may worsen situation
  - Should ask: "who do you see and how helpful are they?" and then focus on the people who are helpful to you
  - Giving support may also be beneficial
  - Set up social support beforehand
  - Military-initiated support
7. Unpublished 2005 Survey of Army Families – reports that this type of support may be lacking, particularly among young/junior families
8. Changes in family roles
- Especially good place to emphasize potential positive impacts
  - Parent at home may be able to develop new relationships with kids
  - New rituals centered around communicating with the deployed family member may be helpful (e. g., the deployed parent taking pictures with one of their child's toys in different places while away)
  - Can learn to value partner more, rekindle relationship

- May return refreshed for parenting role after leaving and returning – can focus more attention on kids

9. Children and deployment

- Fathers may become “visitor fathers” – under communicate with young kids, “check out” of the relationship
- Fathers of adolescent daughters may have an especially hard time